PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. F-299 Attorney Docket Number **DECLARATION FOR UTILITY OR** Zubok; First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** 10/17/2003 Filing Date Declaration Declaration Submitted after Initial Submitted OR

Group Art Unit

with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name		•			
As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Instrumentation and Methods for use in Implanting a Cervical Disc Replacement Device							
·		-					
	(Title of the	nvention)					
the specification of which							
X is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number	and was an	nended on (MM/DD/YYY	m		(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or							
PCT international filing date of the	PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)		Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	py Attached? NO		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

DECLARATION — Utility or Design Patent Application

Direct all correspondence to		er Number ode Label	364	OR Corresponden			тespondence add	iress below
Name								
Address								
City				State	,		ZIP	
Country		Tele	phone				Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any])	Rafail			Family Name or Surname			Zubok;	
Inventor's Signature	XM2	the he			Date / 0/	17/03		
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	Michael W. Family Name or Surname			Dudasik;				
Inventor's Signature Date fo/17/03					7/03			
Residence: City	Nutley,		NJ State	Co	ountry	US	Citizenship	US
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X Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

Please type a plus sign (+) inside this box	→	+
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any])						Family Na	me or Su	ımame
Joseph P.							Erric	0
Inventor's Signature			Date 10/17/03				Date 10/17/03	
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Name of Additio	nal Joint Inventor, if a	ıy:			A petitio	on has been file	ed for thi	s unsigned inventor
Given	Name (first and middle [if any)		Family Name or Surname				
						•		
Inventor's								Date
	Signature			Country			Citizenship	
						- Otazonomp		
Mailing Address		····	······························					
Mailing Address					- T			
City		St	ate	ZIP Cou		Cou	ntry	
Name of Additional Joint Inventor, if any:						unsigned inventor		
Given Name (first and middle [if any])			Family Name or Sumame					
Inventor's Signature						Date		
Residence: City		State			Country			Citizenship
Mailing Address								
Mailing Address								
City		State			ZIP		Co	untry

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